|  |  |
| --- | --- |
|  | CONFIRMATION OF STAY |
|  |
| DEPARTURE ORDER  No. . . . . . . .  of . . . . . . . . . . . . . . . . . . . . . .  For . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  (name and surname of the doctoral student  . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  (name of the organizational unit)  to . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  for the time from . . . . . . . . . . . . . . . . to . . . . . . . . . . . . . . . . .  in order to . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . |
| means of transport: |
| . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  date signature of the sender |
| project/financing source: |  |

\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

I am asking for an advance payment of PLN. . . . . . . . . . . . in words PLN . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

to cover expenses in accordance with the business trip order no. . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . .  
 Signature of the delegate

Approved for PLN . . . . . . . . . . . . . in words PLN . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

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| --- | --- | --- |
| Account | | ID no |
| In | It has |
|  |  |  |

to be paid from the sums. . . . . . . . . . . . . . . . . . . .

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| --- | --- | --- | --- | --- |
| Hi | Department | Chapter | § | Pos. |
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# . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

date signatures of examiners

# TRAVEL COST ACCOUNT

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| TRIP | | | | ARRIVAL | | | | | Means of transport\* ) | Travel expenses | |
| town | date | time. | | | town | date | | time. | PLN and gr | |
|  |  |  | | |  |  | |  |  |  | |
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|  |  |  | | |  |  | |  |  |  | |
| The account was checked for | | | | | | Lump sums for commuting | | | |  | |
| Documented commute | | | |  | |
| Substantive | | | Formal and accounting | | | Total journeys and commuting | | | |  | |
| Diets | | | |  | |
| Accommodation according to invoices | | | |  | |
| . . . . . . . . . . . . . . . . . . . . . .  date signature | | | . . . . . . . . . . . . . . . . .  date signature | | | Accommodation – lump sum | | | |  | |
| Other expenses according to attachments | | | |  | |
| Total  In words: PLN: | | | |  | |
| Approved for PLN . . . . . . . . . . . . . . . . . .  in words . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | | | | | |
| . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  date signatures of approvers | | | | | |
| I acknowledge receipt of PLN. . . . . . . . . . . . . . . . . . . .  In words: PLN. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  date signature | | | | | | I am attaching it  . . . . . . . . . .  evidence | An advance payment has been collected | | |  |  |
| To be paid - refunded | | |  |  |
| I submit this bill  . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  date signature | | | | | |
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An advance payment in the amount of PLN . . . . . . . . . . . . . . in words PLN . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . I have received it and I undertake to settle it on time. . . . days after the end of the trip, at the same time authorizing the workplace to deduct the amount of the unsettled advance payment from the next salary payment.

. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

name and surname of the delegate, date and signature of the delegate

\* ) Mention the means of transport, class, type of ticket (free, reduced, normal). When traveling using your own means of transport (car, motorcycle, moped), also provide the number of kilometers and the rate 1 km.